

ASPIRE • HEALTH

19 December 2012

Measures for VISN 06, Fiscal Year 2012 Quarter 4, Oct. 2011 thru Sept. 2012

Measures • VA National Averages • Aspirational Goals				Aspirational Goals Met ²									
Domain • Measure	T ¹	Average	Goal	06	517	558	565	590	637	652	658	659	
Safety													
<i>Healthcare associated infections</i>	O												
MRSA infection rate	O ▽	0.18	0.00	0.18	0.00	0.18	0.00	0.08	0.59	0.13	0.12	0.00	
VAP infection rate	O ▽	1.76	0.00	2.93	N/A	2.39	N/A	0.00	6.67	2.80	1.98	N/A	
CLAB infection rate	O ▽	1.12	0.00	1.05	N/A	1.65	N/A	1.86	0.00	1.05	0.75	N/A	
Surgical Care Improvement Project	P ▽		99	98	N/A	98	N/A	99	98	97	98	97	
Hospital acquired pressure ulcer rate	O ▽	2.36	0.00	2.64	1.53	3.91	1.79	1.17	1.75	2.37	3.55	2.51	
Incorrect Surgery	P ▽ data not yet available												
Effectiveness													
Composite behavioral health screening	P ▽		98	96	97	94	95	97	96	97	95	97	
<i>Diabetes</i>	P ▽												
Composite diabetes	P ▽		98	89	93	87	86	90	91	89	90	90	
Blood pressure less than 140/90 (dm)	P ▽		85	79	88	75	74	84	79	77	82	77	
HbA1 GT 9 or not done in past year	P ▽		10	20	21	20	26	16	18	23	20	19	
LDL-C less than 100 (diabetes)	P ▽		75	84	91	83	77	81	87	88	85	85	
<i>Ischemic heart</i>	P ▽												
LDL-C less than 100 (vascular dx)	P ▽		75	87	91	87	81	87	86	91	87	86	
LDL-C measured (vascular dx)	P ▽		98	96	100	92	93	99	98	96	96	95	
Blood pressure less than 140/90 (HTN)	P ▽		84	76	86	70	71	82	73	74	77	77	
<i>Prevention</i>	P ▽												
Screening for colorectal cancer	P ▽		100	85	81	85	82	83	85	91	86	88	
Women screened for cervical cancer	P ▽		100	94	96	93	89	94	96	94	92	96	
Women screened for breast cancer	P ▽		100	86	82	94	89	85	75	93	80	92	
Pneumococcal pneumonia immunization	P ▽		100	95	95	94	92	99	98	97	92	95	
Obese patients offered weight mgmt	P ▽		100	96	100	97	99	100	94	95	87	96	
Composite tobacco	P ▽		100	95	97	93	98	100	90	100	87	95	
Composite acute myocardial infarction (AMI)	P ▽		100	98	N/A	98	N/A	N/A	98	98	98	N/A	
Composite heart failure	P ▽		100	99	100	100	100	100	96	100	98	92	
Composite community acquired pneumonia (CAP)	P ▽		99	96	96	95	98	97	96	97	97	94	
<i>Mortality Outcomes</i>	O												
AMI RSMR	O ▽	11.34	12.18	11.44	11.34	11.45	11.37	11.37	11.34	11.37	11.73	11.36	
Pneumonia RSMR	O ▽	11.33	12.92	11.36	10.55	9.23	14.03	9.41	10.34	13.37	11.83	11.80	
CHF RSMR	O ▽	8.14	8.12	8.09	7.19	7.87	8.60	6.93	9.77	7.40	8.66	8.22	

¹ Type **P**=process measure, **O**=outcomes measure. Symbol ▽ means higher value is better than lower value, ▴ means lower value is better than higher value.

² VISN 06=Mid-Atlantic, Facility 517=Beckley, WV, 558=Durham, NC, 565=Fayetteville, NC, 590=Hampton, VA, 637=Asheville, NC, 652=Richmond, VA, 658=Salem, VA, 659=Salisbury, NC.

ASPIRE • HEALTH

19 December 2012

Measures for VISN 06, Fiscal Year 2012 Quarter 4, Oct. 2011 thru Sept. 2012

Measures • VA National Averages • Aspirational Goals				Aspirational Goals Met ²									
Domain • Measure	T ¹	Average	Goal	06	517	558	565	590	637	652	658	659	
Efficiency													
All cause 30-day readmission rate	O	13.6	11.0	12.1	18.1	12.6	9.2	8.8	10.7	14.6	11.4	7.5	
Ambulatory Care Sensitive Conditions (ACSC)	O	29.92		29.10	35.24	27.24	37.96	30.80	26.90	31.70	33.23	18.19	
Timeliness													
<i>Outpatient responsiveness</i>	P	data not yet available											
Getting outpatient care quickly	P	data not yet available											
Getting needed outpatient care	P	data not yet available											
Inpatient responsiveness	P	data not yet available											
Patient-Centeredness													
<i>Inpatient SHEP</i>		data not yet available											
Cleanliness of Hospital Environment	P	data not yet available											
Communication with Doctors	P	data not yet available											
Communication with Nurses	P	data not yet available											
Communication About Medication	P	data not yet available											
Discharge Information	P	data not yet available											
Pain Management	P	data not yet available											
Quietness of the Hospital Environment	P	data not yet available											
Willingness to Recommend	P	data not yet available											
Overall Rating of Hospital Stay	P	data not yet available											
<i>Outpatient SHEP</i>		data not yet available											
How Well Docs/Nurses Communicate	P	data not yet available											
Overall Rating of Personal Doc/Nurse	P	data not yet available											
Outpatient Shared Decision Making	P	data not yet available											
Overall Rating of VA Specialist	P	data not yet available											
Overall Rating of Healthcare in last 12 Months	P	data not yet available											
Equity													
<i>Clinical Composite: White-Nonwhite</i>		data not yet available											
Behavioral Health	P	data not yet available											
Diabetes	P	data not yet available											
Tobacco	P	data not yet available											
Prevention	P	data not yet available											
Ischemic Heart	P	data not yet available											
<i>Inpatient SHEP: Male-Female</i>		data not yet available											
Cleanliness of Hospital Environment	P	data not yet available											

¹ Type P=process measure, O=outcomes measure. Symbol ▽ means higher value is better than lower value, ▲ means lower value is better than higher value.

² VISN 06=Mid-Atlantic, Facility 517=Beckley, WV, 558=Durham, NC, 565=Fayetteville, NC, 590=Hampton, VA, 637=Asheville, NC, 652=Richmond, VA, 658=Salem, VA, 659=Salisbury, NC.

ASPIRE • HEALTH

19 December 2012

Measures for VISN 06, Fiscal Year 2012 Quarter 4, Oct. 2011 thru Sept. 2012

Measures • VA National Averages • Aspirational Goals				Aspirational Goals Met ²										
Domain • Measure	T ¹	Average	Goal	06	517	558	565	590	637	652	658	659		
Equity - Inpatient SHEP: Male-Female (continued)	P	data not yet available												
Communication with Doctors	P	data not yet available												
Communication with Nurses	P	data not yet available												
Communication About Medication	P	data not yet available												
Discharge Information	P	data not yet available												
Overall Rating of Hospital	P	data not yet available												
Responsiveness of Hospital Staff	P	data not yet available												
Pain Management	P	data not yet available												
Quietness of the Hospital Environment	P	data not yet available												
Willingness to Recommend	P	data not yet available												
Inpatient SHEP: White-Nonwhite		data not yet available												
Cleanliness of the Hospital Environment	P	data not yet available												
Communication with Doctors	P	data not yet available												
Communication with Nurses	P	data not yet available												
Communication About Medication	P	data not yet available												
Discharge Information	P	data not yet available												
Overall Rating of Hospital	P	data not yet available												
Responsiveness of Hospital Staff	P	data not yet available												
Pain Management	P	data not yet available												
Quietness of the Hospital Environment	P	data not yet available												
Willingness to Recommend	P	data not yet available												
Outpatient SHEP: Male-Female		data not yet available												
How Well Doctors/Nurses Communicate	P	data not yet available												
Overall Rating of Personal Doctor/Nurse	P	data not yet available												
Getting Needed Care	P	data not yet available												
Overall Rating of VA Healthcare	P	data not yet available												
Getting Care Quickly	P	data not yet available												
Outpatient Shared Decision Making	P	data not yet available												
Overall Rating of VA Specialist	P	data not yet available												
Outpatient SHEP: White-Nonwhite		data not yet available												
How Well Doctors/Nurses Communicate	P	data not yet available												
Overall Rating of Personal Doctor/Nurse	P	data not yet available												
Getting Needed Care	P	data not yet available												
Overall Rating of VA Healthcare	P	data not yet available												

¹ Type **P**=process measure, **O**=outcomes measure. Symbol ▼ means higher value is better than lower value, ▲ means lower value is better than higher value.

² VISN 06=Mid-Atlantic, Facility 517=Beckley, WV, 558=Durham, NC, 565=Fayetteville, NC, 590=Hampton, VA, 637=Asheville, NC, 652=Richmond, VA, 658=Salem, VA, 659=Salisbury, NC.

ASPIRE • HEALTH

19 December 2012

Measures for VISN 06, Fiscal Year 2012 Quarter 4, Oct. 2011 thru Sept. 2012

Measures • VA National Averages • Aspirational Goals				Aspirational Goals Met ²									
Domain • Measure	T ¹	Average	Goal	06	517	558	565	590	637	652	658	659	
Equity - Outpatient SHEP: White-Nonwhite	P	data not yet available											
Getting Care Quickly	P	data not yet available											
Outpatient Shared Decision Making	P	data not yet available											
Overall Rating of VA Specialist	P	data not yet available											

¹ Type **P**=process measure, **O**=outcomes measure. Symbol ▼ means higher value is better than lower value, ▲ means lower value is better than higher value.

² VISN **06**=Mid-Atlantic, Facility **517**=Beckley, WV, **558**=Durham, NC, **565**=Fayetteville, NC, **590**=Hampton, VA, **637**=Asheville, NC, **652**=Richmond, VA, **658**=Salem, VA, **659**=Salisbury, NC.